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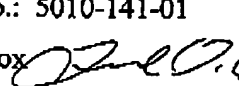
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FACSIMILE TRANSMISSION COVERSHEET

DATE: September 29, 2006

TO: Examiner William H. Beisner
Group Art Unit 1744
Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RE: U.S. Patent Application No. 10/691,186
Filed: October 22, 2003
Confirmation No.: 6805
Attorney Docket No.: 5010-141-01

FROM: Leonard D. Bowersox 

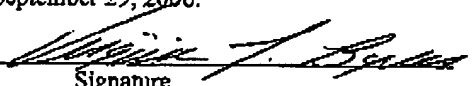
FAC. NO.: (571) 273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 13

Items Attached: Transmittal Form 1 Page
Fee Transmittal 1 Page
Credit Card Payment Form 1 Page
Petition for Two-Month Extension of Time 1 Page
Reply to Office Action 5 Pages
Information Disclosure Statement 2 Pages
PTO/SB/08a 1 Page

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Virginia J. Byers
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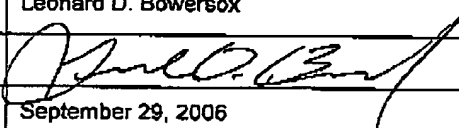
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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/691,186	
		Filing Date	October 22, 2003	
		First Named Inventor	John G. ATWOOD et al.	
		Group Art Unit	1744	
		Examiner Name	William H. Beisner	
Total Number of Pages in This Submission		12	Attorney Docket Number	5010-141-01
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group		
		<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Acknowledgement Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Payment Form PTO-2038 for \$630.00 PTO/SB/08a		
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Firm or Individual name		Leonard D. Bowersox		
Signature				
Date		September 29, 2006		
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Type or printed name		Virginia J. Byers		
Signature		Date	September 29, 2006	

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PTO/SB/17 (12-04)

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Effective on 12/8/2004,
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2006**Complete if Known**

Application Number 10/691,186
 Filing Date October 22, 2003
 First Named Inventor John G. ATWOOD et al.
 Examiner Name William H. Beisner
 Art Unit 1744
 Attorney Docket No. 5010-141-01

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SEP 29 2006☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$630.00)

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number 60-0925 Deposit Account Name Kilyk & Bowersox, P.L.L.C.
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charges fee(s) indicated below, except for the filing fee
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	x	=				
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Information Disclosure Statement Fee	Fees Paid (\$)
Petition for Two-Month Extension of Time Fee	180.00
	450.00

SUBMITTED BY

Signature		Registration No. 33,226	Telephone 703-385-9688
Name (Print/Type)	Leonard D. Bowersox		Date September 29, 2006

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